					Complete if Known							
Substitute for form 1449/PTO					Application Number			10/803 298				
(Revised 04/2003)					Filing Date			Concurrently herewith				
					First Named Invento			Kleine et al.				
INFORMATION DISCLOSURE					roup Art Uni			2.858				
STATEMENT BY APPLICANT												
(Use as many sheets as necessary)					Examiner Name							
Sheet	<i>l</i> of 1			Attorney Docket Num			umber	034691/273971				
YI O D I MONIT DO OVERVENTO												
U. S. PATENT DOCUMENTS Document Number												
Examiner Cite		Document Number		Publication Date		Name of Patentee or		Pages, Columns, Lines, Where				
Initials*			MM-DD-YYYY		Applicant of Cited Document		Relevant Passages of Relevant Figures Appear Sub Clas					
~ <i>I I</i>												
un	1	US-5,589,778			12-31-1996		Ono et al.		324 654			
ar	2	US-5,629,619		05-13-1997		Mednikov		_	324 207.16			
'		US-								(
		US-										
								7				
	<u> </u>	US-				 			\dashv			
		US-				<u> </u>						
FOREIGN PATENT DOCUMENTS												
	·	Foreign Patent Document							Pa	ages, Columns, Lines,	English	
Examiner	Cite			Publication D					Where Relevant assages or Relevant	Language		
Initials	No. Country Code - Number Kind ((if known)		nber Kind Coo	ie	MM-DD-YY	YY Applica Docume		ant of Cited		Figures Appear	Translation Attached	
		(II Kilowii)					200000000					
M	DE 42 25 968		02-10-199		4 Micro-Epsilon				*			
\ \												
				$\overline{}$		-1						
·		*Abstract Only							_			
									/			
					·							
Examiner Signature A			H.	·····	1		Date	dered	-	1/14/05		

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. #4637249v1